MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

10/587765 APPLICANT(S)

SERIAL NO.

FILING DATE

AFTER 2 nd AMENDMENT

DEP.

IND.

(FOR USE WITH FORM PTO-875)

CLAIMS

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TOTAL	188		93	\$500 Kill (1980)	l part	27.00.000000000000000000000000000000000	L	DEP.				(*	
CLAIMS		2	26					TOTAL CLAIMS					
PTO - 1360	(REV. 11/04)								U.S Pat	B. DEPARTM tent and Trade	ENT of COM	MERCE	